

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF COLUMBIA

ABDUL HAMID ABDUL SALAM AL-GHIZZAWI

Petitioner,

v.

GEORGE W. BUSH, et al.,

Respondents

CIVIL ACTION  
NO. 05-cv-02378

**DECLARATION OF CAPTAIN RONALD L. SOLLOCK, M.D., Ph.D.**

Pursuant to 28 U.S.C. §1746, I, Ronald L. Sollock, M.D., Ph. D., hereby declare that to the best of my knowledge, information, and belief, the following is true, accurate, and correct:

1. I am a Captain in the United States Navy Medical Corps with over 27 years of active duty service. I currently serve as the Commander, Naval Hospital, Guantanamo Bay, and Joint Task Force Surgeon, Joint Task Force - Guantanamo Bay, Cuba (JTF-GTMO). I am responsible for the medical care provided to personnel stationed at Guantanamo Bay and oversee the operation of the detention hospital that provides medical care to the detainees being held at Guantanamo Bay. I have served in this position since January 11, 2006. Currently, there are approximately 460 detainees being held at the detention camp at Guantanamo Bay, Cuba. This declaration is based upon my personal knowledge and information supplied to me in my official capacity.

2. I am a licensed physician, having received my medical degree from Baylor College of Medicine. I completed an internship at Baylor College of Medicine. I completed my Internal Medicine Residency at the National Naval Medical Center,

Bethesda, Maryland. I have also held teaching appointments at the Uniformed Services University of the Health Sciences, Bethesda, Maryland.

3. The JTF-GTMO Detention Hospital is a 20-bed facility that is staffed to provide medical care to the detainees held at Guantanamo Bay, Cuba. The medical staff, consisting of approximately 100 military personnel, includes five medical doctors and one physician's assistant. In addition, the medical staff includes medical/surgical nurses, corpsmen, technicians (lab, radiology, pharmacy, operating room, respiratory, physical therapy), and administrative staff.

4. All detainees, upon arrival at Guantanamo Bay, are given a complete physical examination. Medical issues identified during the examination, or identified during subsequent examinations, are followed by the medical staff. Detainees may request medical care at any time by making a request to guard personnel, who make rounds on the cellblocks multiple times daily, or the medical personnel, who make rounds on the cellblocks every day. In addition to responding to detainee requests, the medical staff will investigate any medical issues observed by JTF-GTMO guards or staff. The availability of this care has resulted in thousands of outpatient contacts between detainees and medical staff, followed by in-patient care as needed.

5. For medical procedures beyond the capability of the Detention Hospital, the detainees are transferred to the Naval Base Hospital at Guantanamo Bay. JTF-GTMO can, and has, requested specialists to be flown in to Guantanamo Bay to provide care to a detainee whose medical needs exceed the capabilities of the Detention Hospital and Naval Base Hospital.

6. The Medical staff at the Detention Hospital and the Naval Base Hospital have treated detainees for a variety of medical conditions including hepatitis, heart ailments, hypertension, combat wounds, diabetes, tuberculosis, appendicitis, inguinal hernia, leishmaniasis, malaria, and malnutrition. In addition to providing medical treatment and prescription drugs to detainees, JTF-GTMO's medical staff has provided detainees with prescription eyeglasses and prosthetic limbs.

7. For many of the detainees, it was the United States' military medical staff that initially diagnosed conditions that had been previously unknown to the detainee. Many of the detainees were suffering from significant, undiagnosed, and/or untreated medical conditions. JTF-GTMO has consistently provided high-quality medical care to the detainees, equivalent to the medical care provided to active duty military members. As a result, the health of the detainee population has markedly improved since their arrival at Guantanamo Bay.

8. JTF-GTMO has performed over 290 surgical procedures since January 2002. The first surgeries performed at JTF-GTMO were primarily related to wound care and infection control, as many of the detainees had suffered injuries on the battlefield. Recent surgeries performed at JTF-GTMO range from common procedures, such as removing an appendix, to more complex intervention, such as coronary artery stent placement.

9. The provision of medical care provided to a detainee is based solely upon a detainee's need for such care. Interrogations do not in any way influence medical care provided to detainees. Medical care and treatment are not provided, denied, modified, or affected in any way by a detainee's cooperation, or lack thereof, during an interrogation session. Detainee medical records are not available to interrogators.

10. In June, 2002, detainee ISN 654 (Mr. Al Ghizzawi) arrived at Guantanamo Bay in good health. He continues to be in good health. He has access to medical care on a daily basis, as explained above. He has not been diagnosed with liver disease or cancer of any type.

11. Since arriving at Guantanamo Bay, detainee ISN 654 has consistently gained weight overall. When he arrived, detainee ISN 654 weighed 138 pounds; he currently weighs 150.1 pounds. He is currently at 94% of his ideal body weight.

12. During detainee ISN 654's initial medical evaluation, a history of hepatitis B was identified, and subsequently confirmed by laboratory testing in August, 2002. During this initial medical examination, detainee ISN 654's abdominal exam was normal, except for mild right upper quadrant tenderness. Given his history of Hepatitis B, routine evaluations were instituted per guidelines provided by Gastroenterology for patients with chronic Hepatitis B. This includes routine ultrasound evaluations and serum laboratory testing, to include liver function tests, complete blood counts, electrolytes, and tumor marker, alpha-fetoprotein. In October 2002, and again in May 2003, an ultrasound was performed on the detainee's right upper quadrant abdomen. Both studies were interpreted as normal. When provided the opportunity for a follow-up ultrasound in January 2006, detainee ISN 654 refused. His most recent liver test in February 2006 was normal. That test included serum liver transaminases and bilirubin levels.

13. [REDACTED]

14. On June 28, 2006, detainee ISN 654 consented to a physical examination for a complaint of abdominal pain. During his evaluation, detainee ISN 654's lungs were

bilaterally clear to auscultation; his heart was of normal rate and rhythm and free of murmurs; his abdomen was benign, without distention, palpable masses, hepatosplenomegaly (swelling of the liver or spleen), discomfort with palpation, or dilation of the superficial veins of the abdomen or chest. There was no clinical evidence of jaundice (yellowing of the eyes and skin) or ascites (abdominal distension from excess fluid in the peritoneal cavity) that can be indicative of liver problems. Detainee ISN 654 then declined any further laboratory, radiology, or medical intervention for his complaint.

15. A routine follow-up evaluation was performed on 05 September 2006. During this medical evaluation, detainee ISN 654's medical examination was notable for mild right upper quadrant abdominal pain. He had normal bowel sounds, with the remainder of his abdominal exam documented as benign. There was no distention, palpable masses, hepatosplenomegaly, dilation of the superficial veins of the abdomen or chest, jaundice, or ascities. Detainee ISN 654 consented at this visit to recommended laboratory evaluations, to include a complete blood count (CBC), coagulation panel, complete metabolic profile (CMP), serum magnesium, phosphorus, and amylase, hepatitis B DNA viral load, alpha-fetoprotein, and a urinalysis. The CBC, coagulation panel, CMP, magnesium, phosphorus, amylase, and urinalysis were within the limits of normal. The remainder of the studies are pending. He will be scheduled for the next available appointment for a right upper quadrant ultrasound.

16. Detainee ISN 654 has received diverse medical treatment since arriving at Guantanamo Bay. [REDACTED]

[REDACTED]

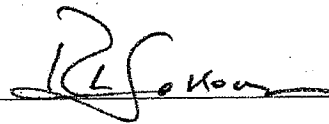
[REDACTED]

[REDACTED]

17. Though he has complained of abdominal pain previously, detainee ISN 654 has not made complaints to the medical department with regard to having a bloated stomach, vomiting, or diarrhea. He is able to stand in a prone position. There is no record of detainee ISN 654 having "passed-out" from pain, as alleged.

I declare under penalty of perjury pursuant to the laws of the United States that the foregoing is true and correct.

Dated: 08 September 2006



Ronald L. Sollock, M.D., Ph. D.